FAX 630 499 2654

OCT 1 2 2005

PART B - FEE(S) TRANSMITTAL

form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CURRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23460

7590

08/01/2005

LEYDIG VOIT & MAYER, LTD TWO PRUDENTIAL PLAZA, SUITE 4900 180 NORTH STETSON AVENUE

10/13/2005 TBESHAHZ 00000210 501599 09595227

01 FC:1301

1400.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Malling or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name) Mariejose Monsalve DAVA (Signaturo (Date) 2005

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/595,227	06/16/2000 .	MINGMING FANG	99154X204201	2766

TITLE OF INVENTION: METHOD FOR POLISHING A MEMORY OR RIGID DISK WITH A PHOSPHATE ION-CONTAINING POLISHING SYSTEM

APPLN. TYPB	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400		\$0	\$1400 11/01/2005				
EXAMINER		ART UNIT		CLASS-SUBCLASS]				
SHAKERI, HADI		3723		451-041000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorney or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Cabot Microelectronics Corporation Aurora, Illinois									
,	te assignee category or catego	ories (will not be pri		oatent): 🔲 Individual 陷 C	orporation or other private g	roup entity Government			
Issue Fee	chclosed.			in the amount of the fee(s) is en	alaad				
_	<u> </u>		Payment by credit card. Form PTO-2038 is attached.						
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			Tayment by credit card. Form 10-2036 is aniacaed. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501599 (circlose an extra copy of this form).						
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See SMALL ENTITY status. See Publication Fee (frequired) cords of the United States Pat cords of the United States Pat	e) 37 CFR 1.27.	D b. Applie	cant is no longer claiming SMA ny) or to re-apply any previousle e other than the applicant; a reg	LL ENTITY status. See 37	CFR 1.27(g)(2).			
Authorized Signature	Awern	my	>	Daie 12	October 2				
Typed or printed name	Steven WESEMAN			Registration	41 37 9				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Parents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Tradomark Office; U.S. DEPARTMENT OF COMMERCE